

Form **990-EZ**
 Department of the Treasury
 Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Information about Form 990-EZ and its instructions is at www.irs.gov/form990ez.**

OMB No 1545-1150
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 01-01-2017, and ending 12-31-2017

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
 World-Voices Organization

Number and street (or P O box, if mail is not delivered to street address) Room/suite
 2654 W Horizon Ridge Pkwy B5-212

City or town, state or province, country, and ZIP or foreign postal code
 Henderson, NV 89052

D Employer identification number
 45-5185761

E Telephone number

F Group Exemption Number ▶

G Accounting Method Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ <http://www.worldvoices.org>

J Tax-exempt status (check only one) - 501(c)(3) 501(c)(6) (insert no) 4947(a)(1) or 527

K Form of organization Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 118,529

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I.

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	10	Grants and similar amounts paid (list in Schedule O)	18	Excess or (deficit) for the year (Subtract line 17 from line 9)
2	Program service revenue including government fees and contracts	11	Benefits paid to or for members	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)
3	Membership dues and assessments	12	Salaries, other compensation, and employee benefits	20	Other changes in net assets or fund balances (explain in Schedule O)
4	Investment income	13	Professional fees and other payments to independent contractors	21	Net assets or fund balances at end of year Combine lines 18 through 20
5a	Gross amount from sale of assets other than inventory	14	Occupancy, rent, utilities, and maintenance		
5b	Less cost or other basis and sales expenses	15	Printing, publications, postage, and shipping		
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	16	Other expenses (describe in Schedule O)		
6	Gaming and fundraising events	17	Total expenses. Add lines 10 through 16		
6a	Gross income from gaming (attach Schedule G if greater than \$15,000)				
6b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)				
6c	Less direct expenses from gaming and fundraising events				
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)				
7a	Gross sales of inventory, less returns and allowances				
7b	Less cost of goods sold				
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)				
8	Other revenue (describe in Schedule O)				
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				

Part II Balance Sheets (see the instructions for Part II)
 Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	73,873	22 87,609
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	73,873	25 87,609
26 Total liabilities (describe in Schedule O).	500	26 500
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	73,373	27 87,109

Part III Statement of Program Service Accomplishments (see the instructions for Part III)
 Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?
 The World-Voices Organization (WoVO) is a non-profit, member-driven international association of voice actors that seeks to educate members about the essentials of voice over performance skills, maintaining high industry standards, and operating a private studio. World-Voices Organization provides mentoring to voice talent across a spectrum of techniques and recording skills, engaging membership in a meaningful community, and ensuring proficient and uniform standards for the practicing voice acting professional.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

28
 See Additional Data Table

(Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/>	28a
29 (Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30 (Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31 Other program services (describe in Schedule O)	If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32 Total program service expenses (add lines 28a through 31a)		32 96,970

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)
 Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Dave Courvoisier President	2 00	0		
Peter Bishop Vice President	2 00	0		
Dan Lenard Director	2 00	0		
Chris Mezzolesta Director	2 00	0		
Katherin Vasilopoulos Secretary	2 00	0		
Randye Kaye Director	2 00	0		
Elizabeth de Nesnera Treasurer	2 00	0		
Pam Lorence Director	2 00	0		
Karyn O-Bryant Director	2 00	0		
Anthony Gettig Director	2 00	0		

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

Table with columns for question number, question text, and Yes/No response columns. Rows include questions 33 through 45b regarding organizational activities, financials, and compliance.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 46 No

Part VI Section 501(c)(3) organizations only
All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 47
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48
49a Did the organization make any transfers to an exempt non-charitable related organization? 49a
b If "Yes," was the related organization a section 527 organization? 49b

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation. Row 1 contains 'NONE'.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization If there is none, enter "None "

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation. Row 1 contains 'NONE'.

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? NOTE. All Section 501(c)(3) organizations must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here Signature of officer: Elizabeth de Nesnera Treasurer, Date: 2018-05-03

Paid Preparer Use Only Print/Type preparer's name: Susan E Goranson, Preparer's signature, Date, Check self-employed, PTIN: P00049464, Firm's name: Goranson and Associates Inc, Firm's EIN: 45-5565460, Firm's address: 717 College Avenue First Floor, Santa Rosa, CA 95404, Phone no: (707) 542-1256

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Additional Data

Software ID: 17005038
Software Version: 2017v2.2
EIN: 45-5185761
Name: World-Voices Organization

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)
<p>28 World-Voices Organization had approximately 800 members at the end of 2017. Members pay dues of \$49 per year (US). In 2017, WoVO received \$47,508 in membership dues. New members pay a one-time application fee of \$25 (US). In 2017, WoVO received \$6,900 in application fees. Membership services include: Access to members-only educational resources on World-Voices Organizations website, peer to peer mentoring, eligibility to attend WoVOCON (the groups annual conference), listing on Voiceover biz, a talent roster for WoVOs professional members only. World-Voices Organization hosts an annual voice actors conference in Las Vegas, NV (June 2017). WoVOCON that includes peer to peer workshops on technical aspects of performance and audio production, as well as business advice (marketing, bookkeeping, insurance, etc.). 138 members attended. Attendee fees at WoVOCON IV totaled \$38,331. Sponsors paid \$23,000 to advertise at the event. WoVOCON IV expenses, which included renting conference facilities and feeding attendees, totaled \$40,841. 34 World-Voices Organization offers an Approved Studio badge to members wishing to assure their clients that they have the necessary skills to produce finished audio at professional levels. 37 members applied for an Approved Studio badge in 2017. This program generated \$1,850.00 in fees in 2017. World-Voices Organization furthers its mission by having an active presence at two types of conferences every year: events for voice actors and events for voice seekers. In 2017, WoVO spent \$5,802.95 on outreach to US voice actors. In 2017, WoVO spent \$357.73 on outreach to non-US voice actors. In 2017, WoVO spent \$349.00 on outreach to voice seekers.</p> <p>(Grants \$ 96,970)</p> <p style="text-align: right;">If this amount includes foreign grants, check here . . . <input type="checkbox"/></p>	<p>28a</p>

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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Department of the Treasury
Internal Revenue Service

Name of the organization
World-Voices Organization

Employer identification number

45-5185761

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1	WoVOCON \$40841

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 2	OPERATING EXPENSE \$6848

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 3	outreach \$6510

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 4	MARKETING/WEBSITE VO biz \$5605

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 5	Memberships Expenses \$2638

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 6	Meetings \$1981

990 Schedule O, Supplemental Information

Return Reference	Explanation
Total Liabilities 1001	Accounts Payable and Accrued Expenses - Beginning \$500 Accounts Payable and Accrued Expenses - Ending \$500